	I FINANCIAL DISCLOSUF SUMMARY PAGE (Please Print or Type)	RE REPORT 16 DEC 08 P SECRETARY STATE OF	OF STATE
Section I Name of Candidate or Political Committee and Chairperson		Office Sought (if candida	
Idaho State Pharmacy Association PAC	City and Zin	Llama Dhana	Work Phone
Mailing Address 816 W Bannock St Ste 105	City and Zip Boise 83702	Home Phone 2086615199	Work Phone 2087733566
Name of Political Treasurer			
Pam Eaton	City and Zin	Liene Dhana	Mark Disease
Mailing Address 816 W Bannock St Ste 105	City and Zip Boise 83702	Home Phone	Work Phone 2083420010
Change of address for: Candidate or Political Commit			2063420010
7 Day Pre-General Report       ✓ 3         Semi-Annual Report (Statewide Candidates Only)         Is this a Termination Report:       Yes         Yes       ✓ No	NO CONTRIBUTIONS OR	EXPENDITURES the box next to the stat	ement below and sign this repor
I hereby certify that I have received no con Section IV To reach your Calendar Year to Date figure: Add this report*	SUMMARY	o expenditures during this	reporting period.
figures to the Column II figures of your previous report (exce		This Period	Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*		XXXXXX	<u>\$</u> 887.50
Line 2: Enter Beginning Cash Balance**	S	887.50	\$XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2	2) 5	<u>.0.00</u>	\$ <u>0.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)		887.50	\$ <u>887.50</u>
Line 5: Total Expenditures (Enter amount from line 11, page	2)	; 0.00	\$ 0.00
Line 6: Enter Ending Cash Balance (Subtract line 5 from line		887.50	\$ 887.50
Line 7: Outstanding Debt to Date (Enter amount from line 18		3 0.00	
*This same figure should be entered on line 1 of all reports f **This is the figure on line 6 of the last Campaign Financial I Note: The closing cash balance for the current reporting per	iled this calendar year. Disclosure Report filed. If this		
Section V			
Return This Report To: Lawerence Denney Secretary of State PO	Eaton	. hereby certify th	at the information in this

Lawerence Denney Secretary of State PO Box 83720 Boise ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Digital Signature Signature of Political Treasurer

Name of Political Treasurer

## DETAILED SUMMARY

Name of Candidate or Committee: Idaho State Pharmacy Association PAC

		Total This Period
	Contributions	
1	Unitemized Contributions (\$50 and less) # of Contributors 0	+ \$0.00
2	Itemized Contributions (Total of all Schedule A sheets)	+ \$0.00
3	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+ \$0.00
4	Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$0.00
(5)	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	= \$0.00

	Expenditures	
6	Unitemized Expenditures (Less than \$25) # of Expenditures 0	+ \$0.00
(7)	Itemized Expenditures (Total of all Schedule B sheets)	+ \$0.00
8	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$0.00
9	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$0.00
(10)	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+ \$0.00
(11)	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	= \$0.00

	Loans, Credit Cards and Debt		
(12)	Outstanding Balance from previous reporting period	+	\$0.00
(13)	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+	\$0.00
14)	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+	\$0.00
(15)	Subtotal	=	\$0.00
16	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	-	\$0.00
17	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	-	\$0.00
(18)	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	=	\$0.00

	Pledged Contributions	
(19)	Unitemized Pledged Contributions (\$50 and less) # of Pledges _0	+ \$0.00
20	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$0.00
21)	Total Pledged Contributions this period	= \$0.00